

*RETURN TO FMF - LOCATION 7540

Pre-Edit

QUERY CONTROL FORM		RTIS USE ONLY	
Application No.	09 660 917	Prepared by	<i>UH</i>
Examiner-GAU	TakaoKa 2817	Date	4/23/04
		No. of queries	1
		Tracking Number	
		Week Date	

area C.B.

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION a. Page Missing b. Text Continuity c. Holes through Data d. Other Missing Text e. Illegible Text f. Duplicate Text g. Brief Description h. Sequence Listing i. Appendix j. Amendments k. Other	MESSAGE <i>1) claims: Original claim 14 depends on a canceled claim (original claim 13),</i>		
	<i>Please resolve</i>		
CLAIMS a. Claim(s) Missing <input checked="" type="checkbox"/> b. Improper Dependency c. Duplicate Numbers d. Incorrect Numbering e. Index Disagrees f. Punctuation g. Amendments h. Bracketing i. Missing Text j. Duplicate Text k. Other	<i>Thanks</i>		
	<i>initials UH</i>		
	RESPONSE		